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## FEC FORM 2

## STATEMENT OF CANDIDACY

							_	
1.	(a) Name of Candidate (in full)							
	Finkenauer, Abby, , ,							
	(b) Address (number and street) P.O. Box 598	□Ct	neck if addre	ss changed		Candidate's FEC Identification Number H8IA01094		
	(c) City, State, and ZIP Code					3. Is This New Amende	t	
	Dubuque		IA	5200	)4	Statement (N) OR (A)		
4.	Party Affiliation	5. Office Sougl	nt		6. State & Dist	rict of Candidate		
	DEMOCRATIC PARTY	House			IA	01		
	DE	SIGNATIO	N OF PR	INCIPAL	. CAMPAIGN	N COMMITTEE		
7.	7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2018 (year of election)							
	NOTE: This designation should be filed with the appropriate office listed in the instructions.							
	(a) Name of Committee (in full)							
	Finkenauer for Cong	gress						
	(b) Address (number and street) P.O. Box 598							
	(c) City, State, and ZIP Code						—	
	Dubuque				IA	52004		
_							_	
	DE	SIGNATIO	N OF OT	HER AU	THORIZED	COMMITTEES		
		(II	ncluding Join	nt Fundraisi	ng Representativ	es)		
8.	I hereby authorize the following name candidacy.	ned committee,	which is NO	T my princip	oal campaign con	nmittee, to receive and expend funds on behalf of my		
	NOTE: This designation should be f	led with the prin	ncipal campa	aign commit	tee.			
	(a) Name of Committee (in full)						_	
	(1,							
	(b) Address (number and street)							
	( ) 0": 0: 1 775 0 1							
	(c) City, State, and ZIP Code							
							_	
	I certify that I have exa	mined this State	ement and to	the best of	my knowledge a	and belief it is true, correct and complete.		
Si	gnature of Candidate					Date		
	gnature of Candidate inkenauer, Abby, , ,			m			-	
				[Elec	tronically Filed]	04/07/2017	•	
				[Elec	tronically Filed]		_	
Fi	inkenauer, Abby, , ,	or incomplete i	nformation n				_	
Fi	inkenauer, Abby, , ,	or incomplete i	nformation n			04/07/2017	<u> </u>	
Fi	inkenauer, Abby, , ,	or incomplete i	nformation n			04/07/2017	<u> </u>	

FEC FORM 2 (REV. 02/2009)